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CONFIRMATION NO. 6308

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | |
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| 10/528,783 | 04/21/2005 RULE | 604 | 1641 | 05/063 | |
| APPLICANTS Hans Schreier, Neuss, GERMANY; Wolfgang Greb, Dusseldorf, GERMANY; ** CONTINUING DATA ***** This application is a 371 of PCT/DE03/03186 09/24/2003 ** FOREIGN APPLICATIONS ***** GERMANY 102 45 508.2 09/27/2002 ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ** | | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <input type="checkbox"/> Met after Allowance // Examiner's Signature Initials | | STATE OR COUNTRY GERMANY | SHEETS DRAWINGS 0 | TOTAL CLAIMS 6 | INDEPENDENT CLAIMS 1 |
| ADDRESS GUDRUN E. HUCKETT DRAUDT SCHUBERTSTR. 15A WUPPERTAL, 42289 GERMANY | | | | | |
| TITLE Medicament/dosimeter combination packaging | | | | | |
| FILING FEE RECEIVED 515 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |